

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.

10/681,899

Confirmation No.: 7711

Applicant

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:

Sanjay KOTHA et al.

Filed

October 10, 2003

Title

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:

METHOD AND KIT FOR INDUCING HYPOXIA IN

TUMORS THROUGH THE USE OF A MAGNETIC FIELD

Group Art Unit

3735

Examiner

GILBERT, Samuel G.

Atty. Docket No.

US 1331/02

Date

July 1, 2008

TWELFTH SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

Pursuant to 37 CFR 1.56 and 1.97-1.98, Applicant(s) note(s) herewith various reference(s) for the Examiner's consideration. The Examiner is respectfully requested to review and officially consider and make the reference(s) of record before issuing the next Office Action in connection with this case.

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189.00 OP

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Twelfth Supp. Information Disclosure Statement dated July 1, 2008

Reply to Office Action of January 3, 2008

Applicants further note for the Examiner's consideration, various Office Actions

dated i) January 20, 2004, October 6, 2004, August 17, 2005, May 30, 2006, August

23, 2007 and June 13, 2008, issued in co-pending U.S. application S.N. 10/302,962,

filed November 25, 2002, and ii) December 9, 2004, October 11, 2005, July 6, 2006,

June 14, 2007 and May 12, 2008, issued in co-pending U.S. application S.N.

10/157,921, filed May 31, 2002, copies of which can be readily accessed from the

Patent Office database.

A completed Form 1449B/PTO listing the reference(s) thereon is enclosed

herewith. (Only the copy(ies) of foreign patent documents and non-patent literature, if

applicable, is/are enclosed.) The Examiner is respectfully requested to return an

initialed copy of Form1449B/PTO along with the next communication in connection with

this case.

A check for \$180.00 to cover the fee under 37 CFR §1.17(p) is enclosed.

It is believed that no additional fee is due for this submission. Should that

determination be incorrect, however, the Commissioner is hereby authorized to charge

any deficiencies, or credit any overpayment, to our Deposit Account No. 01-0433, and

notify the undersigned in due course.

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Should the Examiner have any questions or wish to discuss further this matter, please contact the undersigned at the telephone number provided below.

Respectfully submitted,

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